FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washi

EO TAILE EXCITATION COMMISSION	
ngton, D.C. 20549	OMB APPROVAL

- 1	027	• • • • • • • • • • • • • • • • • • • •
	OMB Number:	3235-0287
	Estimated average burden	

0.5

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Name and Address of Reporting Person*													Relationship of Reporting Person(s) to Issuer (Check all applicable)					
O'Rourke Kevin C				wiatson, me. [WATA]								X	Director Officer (gi	ve title				
(Last) (First) (Middle) 1411 SAND ISLAND PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 05/09/2013								SVP & Chief Legal Officer						
(Street) HONOLULU HI 96819 (City) (State) (Zip)				_	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			Date	ransaction e nth/Day/Year)		2A. Deemed Execution Date If any (Month/Day/Yea	Transaction Dispose Code (Instr.		rities Acquir ed Of (D) (In:			5. Amount of Securities Beneficially Following R	Owned eported	Form: I (D) or I	rm: Direct I or Indirect (Instr. 4)	7. Nature of ndirect Beneficial Ownership		
								Code	v	Amount	ınt (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				nstr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		ion Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Num	Amount or Ti	Reporte Transac (Instr. 4)	tion(s)			
Common Stock Equivalent Units	\$0.0000(1)	05/09/2013		С			6,746.023 ⁽¹⁾	(1)		(1)	Common Stock	6,74	46.023 ⁽¹⁾	\$26.17 ⁽¹⁾	0.00	00	D	

Explanation of Responses:

1. Prior to conversion the reported number of the Issuer's common stock equivalent units under the Issuer's Deferred Compensation Plan (the "DCP") were appropriately increased, in accordance with the anti-dilution provisions applicable to the common stock equivalent units, to reflect the distribution by Issuer of the outstanding shares of Alexander & Baldwin, Inc. (a newly-formed subsidiary formerly known as A&B II, Inc.) to the Issuer's stockholders in a pro-rata spin-off transaction at the close of business on June 29, 2012. This increase to the number of common stock equivalent units preserved the intrinsic value that existed immediately prior to such distribution of Alexander & Baldwin, Inc. shares. Each common stock equivalent unit was, immediately prior to conversion, the economic equivalent of one share of Matson stock. The common stock equivalent units were converted to cash units on the Transaction Date pursuant to the reporting person's election under the terms of the DCP.

/s/ Kevin C. O'Rourke 05/10/2013

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.